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Atty Docket No. 021919-000810US

PTO FAX NO.: (703) 872-9306

ATTENTION: Examiner Ghassem Alie

Group Art Unit 3724

**OFFICIAL COMMUNICATION**  
**FOR THE PERSONAL ATTENTION OF**  
**EXAMINER Ghassem Alie**

**CERTIFICATION OF FACSIMILE TRANSMISSION**

I hereby certify that the following documents in re Application of Lisa Corcoran, et al., Application No. 10/623,125, filed July 17, 2003 for INTERCHANGEABLE DIE PRESS SYSTEM AND METHOD are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached

1. Transmittal Form; and
2. Amendment.

Number of pages being transmitted, including this page: 9

Dated: July 12, 2005

  
Jeanette Olivera

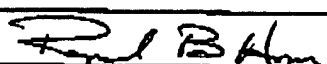
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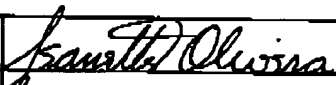
TOWNSEND and TOWNSEND and CREW LLP  
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San Francisco, CA 94111-3834  
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442

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<b>TRANSMITTAL FORM</b> <small>(to be used for all correspondence after initial filing)</small>		Application Number	10/623,125
		Filing Date	July 17, 2003
		First Named Inventor	Corcoran, Lisa
		Art Unit	3724
		Examiner Name	Chassem Alle
Total Number of Pages in This Submission	8	Attorney Docket Number	021919-000810US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Raymond B. Horn		
Date	July 12, 2005	Reg. No.	44,773

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Signature			
Typed or printed name	Jeanette Olivera	Date	July 12, 2005

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PATENT  
Attorney Docket No.: 021919-000810US

TOWNSEND and TOWNSEND and CREW LLP

By: Jeanette Olivera  
Jeanette Olivera

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

Lisa Corcoran, et al.

Application No.: 10/623,125

Filed: July 17, 2003

For: INTERCHANGEABLE DIE PRESS  
SYSTEM AND METHOD

Customer No.: 20350

Confirmation No. 4472

Examiner: Ghassem Alie

Technology Center/Art Unit: 3724

AMENDMENT

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed June 14, 2005, please enter the following  
amendments and remarks:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this  
paper.

**Remarks/Arguments** begin on page 5 of this paper.